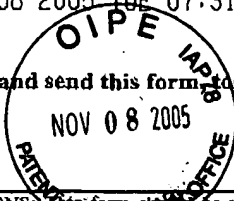


## PART B - FEE(S) TRANSMITTAL

Complete and send this form together with applicable fee(s), to: Mail

Mail Stop ISSU EE  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

22898 7590 08/08/2005

THE LAW OFFICES OF MIKIO ISHIMARU  
1110 SUNNYVALE-SARATOGA ROAD  
SUITE A1  
SUNNYVALE, CA 94087

11/09/2005 AD5MAN2 00000004 010365 10608883

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See Certificate of Transmission (Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/608,883	06/26/2003	Steven C. Avanzino	F0361.C1.D1	7845

TITLE OF INVENTION: INTEGRATED CIRCUIT WITH DIELECTRIC DIFFUSION BARRIER LAYER FORMED BETWEEN INTERCONNECTS AND INTERLAYER DIELECTRIC LAYERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	11/08/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMOOT, STEPHEN W	2813	257-751000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents, if no name is listed, no name will be printed.

1. Mikio Ishimaru

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ADVANCED MICRO DEVICES, INC.

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-0365 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Mikio IshimaruDate November 8, 2005Typed or printed name Mikio IshimaruRegistration No. 27,449

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**The Law Offices of Mikio Ishimaru**

Intellectual Property Law  
Patents - Licensing - Strategy - & Related Matters  
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Sunnyvale, CA 94087  
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Fax: (408) 738-0881

**Fax**

To:	Mail Stop Issue Fee	From:	Mikio Ishimaru
Fax:	(571) 273-2885	Pages:	4, including this page
Phone:		Date:	November 8, 2005
Re:	U.S. Patent Application Serial No. 10/608,883		

☒ Issue Fee☐ Information☐ Other**IMPORTANT**

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I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on November 8, 2005

Signature

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Typed or printed name of person signing Certificate

With reference to serial number 10/608,883 (attorney docket no. F0361.C1.D1), the following are being submitted:

- Fax Cover Sheet with Certificate of Transmission
- Fee(s) Transmittal with duplicate copy
- Fee Address Indication Form